

## FLUORIDE SUPPLEMENT SUPPLIES

### Private Providers

### Packing Slip/Order Blank

\_\_\_\_\_ **Water Sample Kits**

Test Tubes, Mailing Cartons  
Postage Paid Mailing Labels (LAB-505B)  
Fluoride Test Reports (LAB-505C)  
Parent's Instructions

\_\_\_\_\_ **Parent's Consent Forms (DH-9)** For Local Health Departments

\_\_\_\_\_ **Guidelines With Dosage Schedules**

Marked copies are sent to you with water test results

\_\_\_\_\_ **Protocol and Standing Order for Fluoride Supplementation**

For Local Health Departments – one signed copy will cover all children in program

\_\_\_\_\_ **Fluoride From The Start** (formerly "Little Folks")

\_\_\_\_\_ **Follow-up Chart** (Optional)

\_\_\_\_\_ **Parent Notice Multipurpose Postcards (DH-32A)** Replaces D32-DH-35

\_\_\_\_\_ **Distribution Report** (Quarterly Report to Oral Health Program)

\_\_\_\_\_ **Bottles of 120 Tablets** (0.5 mg. Fluoride)

\_\_\_\_\_ **Dropper Bottles of 1 oz. Fluoride Liquid Drops**

\_\_\_\_\_ **Peel-Off Labels for Dropper Bottles**

\_\_\_\_\_ **Packing Slip/Order Blank** (to order these free supplies)

**MAIL OR FAX ORDER TO:**      **LINDA GRACE PIKER**  
   **ORAL HEALTH PROGRAM**  
   **DEPARTMENT FOR PUBLIC HEALTH**  
   **275 EAST MAIN ST. HS2W-B 75**  
   **FRANKFORT, KENTUCKY 40621**  
   **Phone-(502)564-3246 Fax-(502)564-8389**

**SHIP SUPPLIES TO:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
County \_\_\_\_\_ Phone \_\_\_\_\_

**Date:** \_\_\_\_\_ **Attn:** \_\_\_\_\_